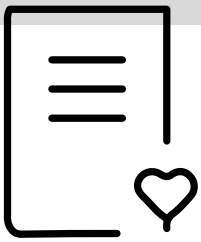
Healthcare.gov Enrollment for Survivors of Domestic Violence

People who have experienced intimate partner violence (IPV) have unique health care needs, making insurance that covers comprehensive medical and behavioral health benefits all the more critical. Community health centers play an important role in helping survivors enroll in coverage and receive quality primary health and oral health care services. A special enrollment period for survivors makes enrollment possible across the year with additional provisions to make coverage more affordable for survivors. When health centers partner with community-based programs that serve survivors – we reach more survivors and improve their health and safety.

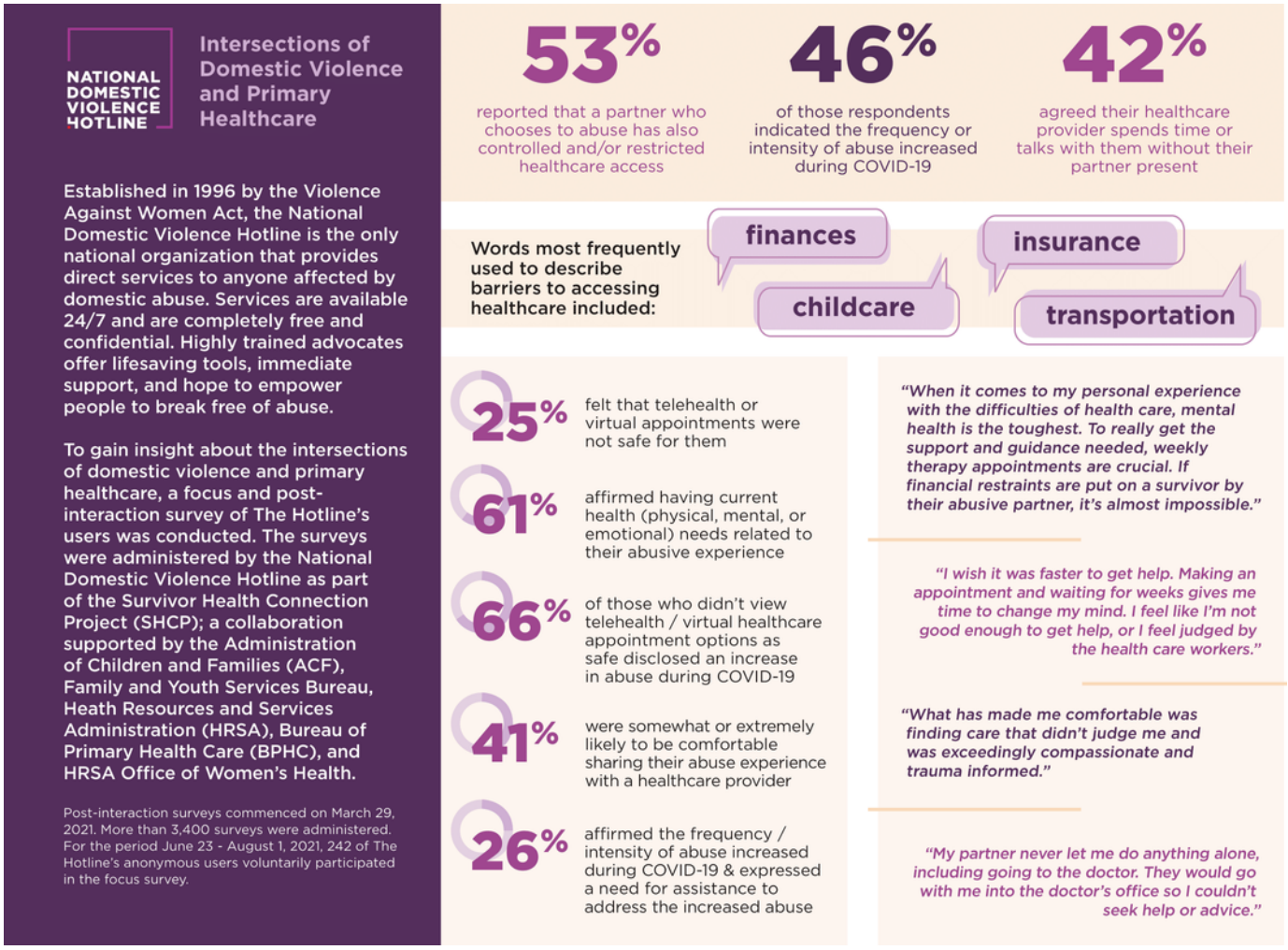
Encourage clients to call the toll-free call center (1-800-318-2596) or refer them to local assisters who are trained to help consumers through the enrollment process if you can't help them right away. A good place to start: https://localhelp.healthcare.gov/. If the client needs DV related support refer them to a local program, or the National Domestic Hotline 1-800-799-SAFE (7233). For Native American clients contact Strongheart Native Helpline 1-844-7-NATIVE (762-8483)



Community based domestic and sexual violence programs and health centers share goals to advance health equity and health outcomes in special medically underserved communities. With the expiration of American Rescue Plan funding and the rising cost of health care, now more than ever it is critical that Americans have access to quality health coverage. Survivors of IPV especially need care that is compassionate, affordable, and easy to access to best promote their healing and prevent future violence. Domestic Violence and Sexual Assault (DV/SA) Program staff and Health Center staff can collaborate to support survivors that are navigating complicated health care systems. DV/SA Program Staff can start by having conversations with survivors about their health, including how IPV impacts their health, Open Enrollment, Special Enrollment Periods, and connecting them with local navigators who are trained to help people find care. Health center staff can connect with DV/SA programs and leverage their expertise through cross-trainings, setting up a warm referral process for patients and survivors, and by increasing access to comprehensive and coordinated care for survivors and their families.

Health Care is Crucial for Survivors of Domestic Violence

Domestic violence (DV) is very common; 1 in 3 women; 1 in 6 men will experience IPV at some point in their lives; with differences in risk due to the conditions in which they live, work, and play. This violence impacts survivors short- and long-term physical, mental and reproductive health and it increases financial and housing insecurity, further eroding health and making IPV a significant national health issue. In addition to the long-lasting health consequences of abuse, we also know that abusive partners interfere with access to care—making access to health insurance that is not dependent on abusive partners even more critical. In a 2021 study of 242 survivors who called the National Hotline on Domestic Violence, 46% reported a partner controlled or restricted their access to health care. It is important to partner with community-based programs that serves survivors to offer them information about health enrollment for themselves and any children.



Infographic developed by the National Domestic Violence Hotline

Community Health Center Staff Can Help!

For those survivors seeking care at health centers – either for themselves or their children, health center staff have a unique opportunity to offer information about how DV impacts their health, where to get help and support with enrollment as needed.

All health plans available at Healthcare.gov must cover a package of core health services. This includes primary care and emergency care as well as behavioral and mental health services, substance use services and screening and brief counseling for IPV. Having health insurance will make these services more affordable and available for survivors. Significant financial help may be available to make purchasing health insurance more affordable.

During open enrollment, individual can shop for health insurance coverage for themselves and their family through the Health Insurance Marketplace. People who are already covered by a Marketplace plan will also be able to renew or change their plan. Open enrollment will begin November 1.



For some individuals and children, comprehensive coverage may be available through Medicaid or the Children's Health Insurance Program (CHIP). It is possible to submit just one Healthcare.gov application to determine whether they are eligible for Medicaid/CHIP or subsidized private coverage. There is no Open Enrollment period for Medicaid and CHIP-enrollment is year-round.



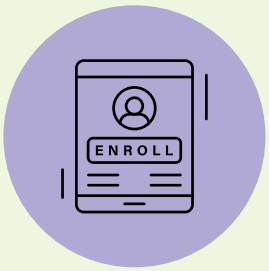
Health Center staff including providers can implement comprehensive programs to offer universal education and respond to survivors and promote prevention. Enrollment specialists or health navigators are important players in the health center's team approach to DV and can partner with staff to help get patients the coverage they need.

Know the Rules that are Specific to IPV

There are specific rules that allow survivors to enroll year-round and make coverage more affordable for some survivors.

Special Enrollment Period for Survivors

After Open Enrollment ends, it is generally not possible to sign up for a new health insurance plan on the Health Insurance Marketplace. However, there are certain "life events" that can trigger a Special Enrollment Period (SEP). Survivors of domestic violence (DV) and their dependents may purchase health insurance at any point during the year by starting a new application with the Call Center and asking for a Special Enrollment Period. They must say that they are a "victim of domestic violence." This is done through self-attestation and no documentation is needed to prove DV. The consumer must enroll in coverage within 60 days after the SEP is granted. This SEP is only available to consumers who are already enrolled in minimum essential coverage. Medicaid enrollment is year-round and anyone who may be eligible for coverage through Medicaid should submit an application.



Most people who purchase coverage through Healthcare.gov will be offered a significant discount on the cost of buying health insurance. This financial help is available on a sliding scale based on income and family size. People apply for financial help after answering questions as part of the healthcare.gov application, and there are special rules for some survivors of domestic violence to get as much financial help as they can.

Survivors of DV who are legally married but who do not live with their spouse and will file taxes separately are not required to count the spouses' income towards their household income. This means that these consumers are able to qualify for financial help based on their own salary — making needed health insurance much more affordable to these victims.

In order to do this, survivors of DV who meet the criteria must indicate they are not married on their Healthcare.gov application. This will allow the appropriate eligibility determination for financial assistance. After the application has been completed, consumers will be able to see what financial help they are eligible for based only on their income (as well as any countable income for any dependents they list on the application). Survivors then can choose a plan that best meets their needs and enroll.

No documentation will be necessary to prove that they are a victim of DV. The IRS and the U.S. Department of Health and Human Services have published guidance on this for victims of DV and there is no penalty for misstating your marital status under these circumstances.

For the purposes of safety and confidentiality, survivors may choose to use a mailing address that is different from the address where they physically reside. To do this, they should select "no home address" on the enrollment form. The application will then be processed using the address listed as the applicants' mailing address in the application. It is important to note that the mailing address will be used to determine which plans are available to the applicant, so the mailing address used should be in the same area where the applicant will need to receive services. It is possible to use the address of a trusted relative, or of a shelter that is able to hold mail. In addition, there is an option to receive communications from Healthcare.gov electronically, rather than through the postal service.

Additional Considerations that May Impact Financial Health Available to Survivors of DV

If the survivor is legally married but has separated from an abusive spouse, they may be eligible for financial assistance to help pay for a Healthcre.gov plan based solely on their own income (and not including their spouse's) as explained above. But there are some important rules that may also impact a survivor's Healthcare.gov application.

- If a survivor is married filing jointly and their spouse can buy family insurance through their job that meets the ACA criteria for "affordability" the survivor will not be eligible to get financial help to purchase their separate insurance on the Health Insurance Marketplace. This is true even if the spouse refuses to cover the victim.

- If a survivor is married filing jointly, the family's whole household income is used to determine eligibility for financial assistance. This is true even if the spouse refuses to cover the victim.

Who can qualify to purchase health insurance in the Health Insurance Marketplace?

Almost everyone can buy insurance in the Health Insurance Marketplace. Undocumented immigrants may not purchase coverage for themselves in the Health Insurance Marketplace, but they may purchase insurance on behalf of documented individuals (e.g. an undocumented spouse may purchase coverage for their citizen spouse or children). Lawfully present immigrants (including those subject to the 5-year bar) may buy insurance on the Health Insurance Marketplace and receive financial assistance.

Special Rules for Members of Tribes

The special IRS filing rules for married survivors of DV apply to American Indians and Alaska Natives as well. Additionally, American Indians and Alaska Natives may enroll in coverage through the Health Insurance Marketplace at any time during the year and need not wait for Open Enrollment or a Special Enrollment Period. They may also change plans at any time during the year, up to once a month.

Reach out to your Local Community Based DV Programs

Think outside of your health center walls to promote access to health services and consider sending your enrollment specialists out to visit local domestic violence programs, and to offer enrollment for their clients and staff. Every state and territory maintains a DV coalition, visit nnedv.org/content/state-u-s-territory-coalitions/ to identify your coalition; or www.niwrc.org/tribal-coalitions to identify Tribal Coalitions and reach out to identify local DV program(s). Approach your local program and ask them to consider partnering to increase health enrollment, provide medical coverage for staff, or provide mobile health or other supportive services onsite for clients. For a sample MOU and partnering worksheet, visit: ipvhealthpartners.org/partner/. Where a local program is not available, the National Hotline on Domestic Violence is available 24/7 - calling 1-800-799-SAFE (7233), for free and confidential supports. For Native American clients contact Strongheart Native Helpline 1-844-7-NATIVE (762-8483)

Domestic violence and sexual assault programs in turn can support the health center's response to patients as they have vast experiences working with survivors of violence and can assist them to identify ways to increase personal safety while assessing the risks.

NNEDV
NATIONAL NETWORK TO END DOMESTIC VIOLENCE

NATIONAL INDIGENOUS WOMEN'S RESOURCE CENTER

Domestic violence advocates connect patients to supportive services like:

- ✓ Safety planning (usually 24hr. hotline)
- ✓ Legal advocacy for IPV/HT, family court, immigration, labor
- ✓ Support groups/counseling
- ✓ Children's services
- ✓ Employment support

Educate Staff to also Know about the Domestic Violence Program's Provisions

Domestic violence isn't something that just impacts patients – it impacts all of us and coworkers may also need support and referrals. Be sure to let staff know through employee assistance programs and other staff education and onboarding channels that these community-based programs, including domestic violence programs, are open to them as well, including the National Hotline on Domestic Violence 800-799-SAFE (7233), 24/7, free and confidential. For Native Americans and Alaska Natives, Contact StrongHearts Native Helpline 1-844-7NATIVE (762-8483), a safe, anonymous, and confidential domestic violence and dating violence helpline offering culturally-appropriate support and advocacy. Similarly, health centers are accessible for domestic violence program clients and staff – staff who themselves may not have health benefits or coverage.

For more info read: Assisting Victims of Domestic Violence

https://marketplace.cms.gov/technical-assistance-resources/assisting-victims-of-domestic-violence.pdf

Health Partners on IPV + Exploitation serves federally-funded health centers through training on building partnerships, policy development, and the integration of processes designed to promote prevention and increase the identification and referral to supportive services for individuals at risk for, experiencing, or surviving IPV, HT, and exploitation.

Learn more:
healthpartnersipve.org/
futureswithoutviolence.org/

FUTURES WITHOUT VIOLENCE

HEALTH PARTNERS ON IPV + EXPLOITATION

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